Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW MEXICO		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Christopher	Mary Ann
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Holsapple	Holsapple
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3842	xxx-xx-8090

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	5897 Alpha Circle Santa Teresa, NM 88008	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Dona Ana	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition,	Check one:  Over the last 180 days before filing this petition, I
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

pple le		Case number (if known)	
our Bankruptcy C	use		
	orief description of each, see <i>Notice Require</i> go to the top of page 1 and check the appro	ed by 11 U.S.C. § 342(b) for Individuals Filing for Banki opriate box.	ruptcy
Chapter 7			
☐ Chapter 11			
☐ Chapter 12			
☐ Chapter 13			
about how y order. If you a pre-printed  I need to pa	ou may pay. Typically, if you are paying the fattorney is submitting your payment on you address.  y the fee in installments. If you choose this	check with the clerk's office in your local court for mor fee yourself, you may pay with cash, cashier's check, or behalf, your attorney may pay with a credit card or ch s option, sign and attach the <i>Application for Individuals</i>	or money neck with
☐ I request the but is not recapplies to you	uired to, waive your fee, and may do so only ur family size and you are unable to pay the	option only if you are filing for Chapter 7. By law, a judy if your income is less than 150% of the official povert fee in installments). If you choose this option, you must (Official Form 103B) and file it with your petition.	y line that
■ No.			
☐ Yes.			
District	When	Case number	
District	When	Case number	
District	When	Case number	
■ No			
☐ Yes.			
Debtor		Relationship to you	
District	When	Case number, if known	
Debtor		Relationship to you	
District	When	Case number, if known	
■ No. Go to	ine 12.		
☐ Yes. Has y	our landlord obtained an eviction judgment a	ngainst you?	
	No. Go to line 12.		
	Yes. Fill out <i>Initial Statement About an Evid</i> this bankruptcy petition.	ction Judgment Against You (Form 101A) and file it as	part of
		<ul><li>No. Go to line 12.</li><li>Yes. Fill out <i>Initial Statement About an Evi</i></li></ul>	<ul> <li>No. Go to line 12.</li> <li>Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as</li> </ul>

	otor 1 Christopher Holsa otor 2 Mary Ann Holsapp			Case number (if known)				
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Propri	etor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and location of bu	usiness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	y				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code				
	it to this petition.			pox to describe your business:				
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Brok	xer (as defined in 11 U.S.C. § 101(6))				
			☐ None of the abo	ve				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of <i>small</i>	■ No.	I am not filing under Cha	apter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
				Number, Street, City, State & Zip Code				

#### Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 2 Mary Ann Holsap				Case nu	umber (if known)	
Pari 16.	t 6: Answer These Quest  What kind of debts do you have?	16a. <i>I</i>	porting Purposes  Are your debts primarily consuluding primarily for a personal,			defined in 11 U.S.C. § 101(8) a	s "incurred by an
	,	_	☐ No. Go to line 16b.	, <b>,</b> ,			
		ı	Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investme				
		[	☐ No. Go to line 16c.				
		[	☐ Yes. Go to line 17.				
		16c. S	State the type of debts you owe th	nat are not consum	ner debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	<b>—</b> 163.	am filing under Chapter 7. Do yo are paid that funds will be availabl				strative expenses
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	<b>\$100,00</b>	0,000 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,000	- \$50 million - \$100 million	☐ \$500,000,001 - \$1 ☐ \$1,000,000,001 - \$ ☐ \$10,000,000,001 - \$ ☐ More than \$50 billi	\$10 billion \$50 billion
20.	How much do you estimate your liabilities to be?	<b>\$100,00</b>	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,000	- \$50 million - \$100 million	□ \$500,000,001 - \$1 □ \$1,000,000,001 - □ \$10,000,000,001 □ More than \$50 bill	\$10 billion - \$50 billion
Par	7: Sign Below						
For	you	I have exa	mined this petition, and I declare u	under penalty of pe	erjury that the i	nformation provided is true and	correct.
			osen to file under Chapter 7, I am tes Code. I understand the relief a				
			ey represents me and I did not pa I have obtained and read the noti				out this
		I request re	elief in accordance with the chapte	er of title 11, Unite	d States Code,	specified in this petition.	
			nd making a false statement, conc case can result in fines up to \$25				
		/s/ Christ	opher Holsapple		/s/ Mary Anr		
		Christopl Signature of	her Holsapple of Debtor 1		Mary Ann Ho Signature of D		
		Executed of	April 18, 2019  MM / DD / YYYY		Executed on	April 18, 2019 MM / DD / YYYY	

Debtor 1 Christopher Hols Debtor 2 Mary Ann Holsap	• •	Cas	se number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			wledge after an inquiry that the information in the
	/s/ Kenneth G. Egan	Date	April 18, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Kenneth G. Egan		
	Printed name		
	Law Offices of Kenneth G. Egan & Ass	soc.	
	Firm name		
	1111 E. Lohman Ave.		
	Las Cruces, NM 88001		
	Number, Street, City, State & ZIP Code		
	Contact phone <b>575-523-2222</b>	Email address	bk_egan@yahoo.com
	Bar number & State		

Debtor 1	Christopher Holsapple		
Dobtor 2	First Name Middle Name Last Name		
Debtor 2 (Spouse if, filing)	Mary Ann Holsapple       First Name     Middle Name       Last Name		
United States B	ankruptcy Court for the: DISTRICT OF NEW MEXICO		
Case number			
(if known)		_	ck if this is an nded filing
		anic	naca ming
Official Fo	orm 106Sum		
	of Your Assets and Liabilities and Certain Statistical Information		12/15
nformation. Fill	and accurate as possible. If two married people are filing together, both are equally responsible for out all of your schedules first; then complete the information on this form. If you are filing amended		
	rms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Part 1: Sumr	narize Your Assets		
			assets of what you own
	A/B: Property (Official Form 106A/B)		400 000 00
1a. Copy li	ne 55, Total real estate, from Schedule A/B	\$	160,000.00
1b. Copy li	ne 62, Total personal property, from Schedule A/B	\$	21,600.00
1c. Copy li	ne 63, Total of all property on Schedule A/B	\$	181,600.00
Part 2: Sumr	narize Your Liabilities		
			<b>liabilities</b> nt you owe
	D: Creditors Who Have Claims Secured by Property (Official Form 106D) ne total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	176,384.00
	E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) he total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy t	he total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	101,261.02
	Your total liabilities	\$	277,645.02
Dort 2: Sum	navira Vaur Income and Evnance		
	narize Your Income and Expenses		
	: Your Income (Official Form 106I) combined monthly income from line 12 of Schedule I	\$	4,657.98
	I: Your Expenses (Official Form 106J) monthly expenses from line 22c of Schedule J	\$	4,838.50
Part 4: Answ	er These Questions for Administrative and Statistical Records		
-	ing for bankruptcy under Chapters 7, 11, or 13? ou have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
■ Yes 7. What kind	of debt do you have?		
- Vour	debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a		l familie an

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1	Christopher Holsapple
Debtor 2	Mary Ann Holsapple

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,513.64

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
From Part 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	54,411.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	54,411.00

D 1 4	nformation to identify	<u> </u>	g.			
Debtor 1	Christopher First Name		Name Last Name			
Debtor 2	Mary Ann Ho					
(Spouse, if filing)	First Name	Middle	Name Last Name			
United States	s Bankruptcy Court for	the: DISTRICT	OF NEW MEXICO			
Case numbe	er					☐ Check if this is ar amended filing
O(()	E 400 A /D					
	Form 106A/B	-				
Sched	ule A/B: Pr	operty				12/15
Answer every	question.	·	neet to this form. On the top of any additional pa her Real Estate You Own or Have an Interest In	953, m.n.o your ma	o and odde	
. Do you own	n or have any legal or eq	uitable interest in a	ny residence, building, land, or similar property	?		
☐ No. Go to	n Port 2					
_						
V/00 \//b						
Yes. Wh	ere is the property?					
■ Yes. Wh	ere is the property?					
	ere is the property?		What is the property? Check all that apply			
1.1	ere is the property?		What is the property? Check all that apply  Single-family home	Do not deduc	ct secured cla	ims or exemptions. Put
1.1 <b>5897 A</b>		cription		the amount of	of any secured	d claims on Schedule D:
1.1 <b>5897 A</b>	Alpha Circle	cription	Single-family home	the amount of	of any secured	
1.1 <b>5897 A</b>	Alpha Circle	cription	Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of Creditors Wh	of any secured ho Have Clain	d claims on Schedule D: ns Secured by Property.
1.1 5897 A Street add	Alpha Circle	cription 88008-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of	of any secured tho Have Clain ue of the	d claims on Schedule D:
1.1 5897 A Street add	Alpha Circle dress, if available, or other des		■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative  □ Manufactured or mobile home	the amount of Creditors Wh	of any secured tho Have Clain ue of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
1.1	Alpha Circle dress, if available, or other des	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current valuentire prope	of any secured ho Have Clain use of the erty?  0,000.00  e nature of ye	Current value of the portion you own? \$160,000.00  our ownership interest
1.1	Alpha Circle dress, if available, or other des	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current valuentire prope \$160  Describe the (such as fee	of any secured to Have Claim use of the lefty?  0,000.00  e nature of yes simple, tense	Current value of the portion you own? \$160,000.00  our ownership interest
5897 A Street add	Alpha Circle dress, if available, or other des	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current valuentire prope \$160  Describe the (such as fee	of any secured to Have Claim use of the lefty?  0,000.00  e nature of yes simple, tense	Current value of the portion you own? \$160,000.00  our ownership interest
5897 A Street add	Alpha Circle dress, if available, or other des  Teresa NM  State	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check on	Current valuentire prope \$160  Describe the (such as fee	of any secured to Have Claim use of the lefty?  0,000.00  e nature of yes simple, tense	Current value of the portion you own? \$160,000.00  our ownership interest
5897 A Street add  Santa City	Alpha Circle dress, if available, or other des  Teresa NM  State	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check on	Current valuentire prope \$160  Describe the (such as fee a life estate)	of any secured to Have Claim  ue of the enty?  0,000.00  e nature of yes simple, tens ), if known.	Current value of the portion you own? \$160,000.00 our ownership interest ancy by the entireties, or
5897 A Street add  Santa City	Alpha Circle dress, if available, or other des  Teresa NM  State	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check on Debtor 1 only Debtor 2 only	Current valuentire prope \$160  Describe the (such as fee a life estate)	of any secured to Have Claim  ue of the entry?  0,000.00  e nature of ye is simple, tend, if known.	Current value of the portion you own? \$160,000.00  our ownership interest
5897 A Street add  Santa City	Alpha Circle dress, if available, or other des  Teresa NM  State	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current valuentire prope \$160  Describe the (such as fee a life estate)  Check i (see instr	of any secured to Have Claim  ue of the erty?  0,000.00  e nature of ye simple, tens ), if known.	Current value of the portion you own? \$160,000.00 our ownership interest ancy by the entireties, or
5897 A Street add  Santa City	Alpha Circle dress, if available, or other des  Teresa NM  State	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check on Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this	Current valuentire prope \$160  Describe the (such as fee a life estate)  Check i (see instr	of any secured to Have Claim  ue of the erty?  0,000.00  e nature of ye simple, tens ), if known.	Current value of the portion you own? \$160,000.00 our ownership interest ancy by the entireties, or
5897 A Street add  Santa City	Alpha Circle dress, if available, or other des  Teresa NM  State	88008-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this property identification number:	Current valuentire prope \$160  Describe the (such as fee a life estate)	of any secured to Have Claim  ue of the erty?  0,000.00  e nature of ye simple, tens ), if known.	Current value of the portion you own? \$160,000.00 our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt		nristopner Holsappie ary Ann Holsapple		Case number (if known)	
3. <b>C</b> a	ars, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
	No				
	Yes				
				Do not do diret con	word deine an expension Put
3.1	Make:	Honda	Who has an interest in the property? Check one	the amount of any	cured claims or exemptions. Put secured claims on Schedule D:
	Model:	Pilot	Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2017	Debtor 2 only	Current value of	
		nate mileage:ormation:	<ul><li>Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors and another</li></ul>	entire property?	portion you own?
	Other init	omation.	At least one of the debtors and another		
			Check if this is community property (see instructions)	<b>\$16,000</b>	\$16,000.00
.pa	ages you		own for all of your entries from Part 2, includi ite that number here		\$16,000.00
6. <b>H</b> c	ousehold	or have any legal or equitable goods and furnishings Major appliances, furniture, line	e interest in any of the following items?  ens, china, kitchenware		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	l No				
	Yes. De	scribe			
		Usual housel	hold goods and furnishings		\$4,000.00
E		including cell phones, cameras	video, stereo, and digital equipment; computers,   s, media players, games	printers, scanners; music c	collections; electronic devices
E		Antiques and figurines; painting other collections, memorabilia,	gs, prints, or other artwork; books, pictures, or oth collectibles	er art objects; stamp, coin	, or baseball card collections;
E	xamples: \$	for sports and hobbies Sports, photographic, exercise musical instruments	, and other hobby equipment; bicycles, pool table	s, golf clubs, skis; canoes	and kayaks; carpentry tools;
_	Yes. De	scribe			

Debtor	-		Case number (if I	(nown)
10. <b>Fir</b> e		shotguns, ammunition, and rela	ated equipment	
■ N	No Yes. Describe			
	camples: Everyday cloth	es, furs, leather coats, designe	er wear, shoes, accessories	
□ N	√es. Describe			
		Clothing		\$500.00
	<i>camples:</i> Everyday jewel	lry, costume jewelry, engagem	ent rings, wedding rings, heirloom jewelry, watches, g	ems, gold, silver
	J	Jewelry		\$100.00
Ex ■ N □ Y 14. <b>A</b> n	es. Describe y other personal and h	nousehold items you did not	already list, including any health aids you did not	list
		all of your entries from Part mber here	3, including any entries for pages you have attach	\$5,600.00
Part 4:	Describe Your Financial	I Assets		
Do you	u own or have any lega	al or equitable interest in any	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	<i>camples:</i> Money you hav No	ve in your wallet, in your home	, in a safe deposit box, and on hand when you file you	r petition
	institutions. If y		s; certificates of deposit; shares in credit unions, broken the same institution, list each.	erage houses, and other similar
	/es		Institution name:	
		17.1. Checking/Savings	Chase Bank	\$0.00
		17.2. Checking/Savings	BBVA Compass Bank	\$0.00
Ex	camples: Bond funds, inv	publicly traded stocks vestment accounts with broker	age firms, money market accounts	
■ N	√es	Institution or issuer nam	ne:	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2		Christopher Holsapple Mary Ann Holsapple	Case number (if known)
19.	•	ublicly traded stock and interests in incorporated and venture	unincorporated businesses, including an interest in an LLC, partnership, and
		Give specific information about them	% of ownership:
20.	Negoti	nment and corporate bonds and other negotiable and iable instruments include personal checks, cashiers' chee egotiable instruments are those you cannot transfer to so	cks, promissory notes, and money orders.
		Give specific information about them Issuer name:	
21.		ment or pension accounts bles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrif	t savings accounts, or other pension or profit-sharing plans
	☐ Yes.	List each account separately.  Type of account: Inst	itution name:
22.	Your s	ty deposits and prepayments share of all unused deposits you have made so that you roles: Agreements with landlords, prepaid rent, public utilit	nay continue service or use from a company ies (electric, gas, water), telecommunications companies, or others
		Ins	itution name or individual:
23.	Annuiti	ies (A contract for a periodic payment of money to you, e	either for life or for a number of years)
	☐ Yes	Issuer name and description.	
24.		ts in an education IRA, in an account in a qualified Al C. §§ 530(b)(1), 529A(b), and 529(b)(1).	BLE program, or under a qualified state tuition program.
	Yes	Institution name and description. Separate	ely file the records of any interests.11 U.S.C. § 521(c):
25.	Trusts, ■ No	, equitable or future interests in property (other than	anything listed in line 1), and rights or powers exercisable for your benefit
	☐ Yes.	Give specific information about them	
26.	Examp	s, copyrights, trademarks, trade secrets, and other in ples: Internet domain names, websites, proceeds from ro	
	■ No □ Yes.	Give specific information about them	
27.		ses, franchises, and other general intangibles bles: Building permits, exclusive licenses, cooperative as	sociation holdings, liquor licenses, professional licenses
	☐ Yes.	Give specific information about them	
M	oney or	property owed to you?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax ref ■ No	funds owed to you	
	☐ Yes.	Give specific information about them, including whether	ou already filed the returns and the tax years
29.	•	support  oles: Past due or lump sum alimony, spousal support, chi	ld support, maintenance, divorce settlement, property settlement
	☐ Yes.	Give specific information	

Official Form 106A/B Schedule A/B: Property page 4

	ebtor 1 ebtor 2	Christopher Holsapple Mary Ann Holsapple	Case number (if known)	
	Exam <sub>i</sub> ■ No	amounts someone owes you  bles: Unpaid wages, disability insurance payme benefits; unpaid loans you made to someo  Give specific information	ents, disability benefits, sick pay, vacation pay, workers' compe one else	nsation, Social Security
	Interes Exam	sts in insurance policies	savings account (HSA); credit, homeowner's, or renter's insura	nce
	■ No □ Yes.	Name the insurance company of each policy a Company name:	nd list its value. Beneficiary:	Surrender or refund value:
	If you somed	terest in property that is due you from some are the beneficiary of a living trust, expect processone has died.  Give specific information	eone who has died eeds from a life insurance policy, or are currently entitled to rec	eive property because
	Exam <sub>i</sub> ■ No	s against third parties, whether or not you had bles: Accidents, employment disputes, insurance Describe each claim	ave filed a lawsuit or made a demand for payment se claims, or rights to sue	
	■ No	contingent and unliquidated claims of every  Describe each claim	nature, including counterclaims of the debtor and rights to	o set off claims
	■ No	nancial assets you did not already list  Give specific information		
36		the dollar value of all of your entries from Pa art 4. Write that number here	art 4, including any entries for pages you have attached	\$0.00
Pa	rt 5: De	scribe Any Business-Related Property You Own o	r Have an Interest In. List any real estate in Part 1.	
ı	No. Go	own or have any legal or equitable interest in any on to Part 6. So to line 38.	business-related property?	
Pa		scribe Any Farm- and Commercial Fishing-Related rou own or have an interest in farmland, list it in Part 1		
46.	■ No.	a own or have any legal or equitable interest Go to Part 7. Go to line 47.	in any farm- or commercial fishing-related property?	
Pa	rt 7:	Describe All Property You Own or Have an Inter	rest in That You Did Not List Above	
	Exam <sub>i</sub> ■ No	u have other property of any kind you did no oles: Season tickets, country club membership	t already list?	
		Give specific information	art 7. Write that number here	\$0.00

Official Form 106A/B page 5 Schedule A/B: Property

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$160,000.00
56.	Part 2: Total vehicles, line 5		\$16,000.00		
57.	Part 3: Total personal and household items, line 15		\$5,600.00		
58.	Part 4: Total financial assets, line 36		\$0.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$21,600.00	Copy personal property total	\$21,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$181,600.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Christopher Hols	apple		
	First Name	Middle Name	Last Name	
Debtor 2	Mary Ann Holsap	ple		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEXICO		
Case number				<b>—</b> 0
(if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1	Which set of exemptions a	are vou claiming? Chock on	a anly ayon if your end	uso is filina with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	cck only one box for each exemption.	
5897 Alpha Circle Santa Teresa, NM 88008 Dona Ana County	\$160,000.00		\$692.00	N.M. Stat. Ann. § 42-10-9
Primary residence Line from Schedule A/B: 1.1		☐ 100% of fair market value, tany applicable statutory lim		
2017 Honda Pilot Line from Schedule A/B: 3.1	\$16,000.00		\$0.00	N.M. Stat. Ann. §§ 42-10-1,
Ellie Holli Gonedale A/D. G.1			100% of fair market value, up to any applicable statutory limit	
Usual household goods and furnishings	\$4,000.00		\$4,000.00	N.M. Stat. Ann. §§ 42-10-1,
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	N.M. Stat. Ann. §§ 42-10-1,
Zino nom Gonedale 772. TT			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	N.M. Stat. Ann. §§ 42-10-1,
Ello Holli Golleddio 7/D.			100% of fair market value, up to any applicable statutory limit	

**Christopher Holsapple** Debtor 1 Mary Ann Holsapple Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Jewelry** N.M. Stat. Ann. §§ 42-10-1, -2 \$100.00 \$100.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Checking/Savings: Chase Bank N.M. Stat. Ann. §§ 42-10-1, -2 \$0.00 \$0.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking/Savings: BBVA Compass** N.M. Stat. Ann. §§ 42-10-1, -2 \$0.00 \$0.00 **Bank** Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this inform	ation to identify you	ır case:				
Debtor 1	Christopher Ho	Isannie				
Dobto: 1	First Name	Middle Name Last Nar	ne		-	
Debtor 2	Mary Ann Holsa	apple				
(Spouse if, filing)	First Name	Middle Name Last Nar	ne			
United States Ban	kruptcy Court for the:	DISTRICT OF NEW MEXICO				
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form	106D					
-		M/I II OI I O				
Schedule I	D: Creditors	Who Have Claims Secu	ıred	by Propert	<u>y                                    </u>	12/15
		If two married people are filing together, both a out, number the entries, and attach it to this fo				
, ,	nave claims secured by	v vour property?				
	•	his form to the court with your other schedul	es Yo	ı have nothing else t	o report on this form	
_	all of the information	·		a nave neumig elec i		
		Delow.				
Part 1: List All	Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the creditor sepa s a particular claim, list the other creditors in Part 2		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	. A3	Do not deduct the	that supports this	portion
2.1 BMW Final	ncial Services	Describe the property that secures the claim		value of collateral. \$17,076.00	claim \$16,000.00	If any <b>\$1,076.00</b>
Creditor's Name	iciai Sei vices	2017 Honda Pilot	· - -	\$17,076.00	Φ10,000.00	\$1,070.00
		2017 Holida Filot				
		A control of the state of the s				
P O Box 36		As of the date you file, the claim is: Check all the apply.	nat			
Dublin, OH	43016	☐ Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
Who owes the deb	42 011	Disputed				
_	or Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage car loan)	or secu	rea		
■ Debtor 1 and Debtor 1	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)			
_	e debtors and another	☐ Judgment lien from a lawsuit	,			
Check if this cla		Other (including a right to offset)				

community debt

Date debt was incurred 2016

Last 4 digits of account number

0258

Debtor 1		<b>Christopher Hols</b>	apple	e (			Case number			
	_	First Name	Middle Nan	ne	Last Name	-				
Debtor	2	Mary Ann Holsap	ple							
		First Name	Middle Nan	ne	Last Name	_				
2.2 <b>I</b> I	DН	IOUSING AGENC	Y	Describe the	e property that secures t	he claim:	\$159,3	08.00	\$160,000.00	\$0.00
C	redito	or's Name		-	na Circle Santa Tero ona Ana County esidence	esa, NM				
	_	Box 7899 se, ID 83707		As of the dare apply.  Continger	te you file, the claim is:	Check all that	_			
N	lumbe	er, Street, City, State & Zip (		☐ Unliquida☐ Disputed☐	ted					
Who o	wes	the debt? Check one		Nature of lie	en. Check all that apply.					
□ Deb		•		An agreed car loan)	ment you made (such as r	nortgage or	secured			
Deb	otor 1	1 and Debtor 2 only		☐ Statutory	lien (such as tax lien, med	hanic's lien	)			
☐ At le	east	one of the debtors and	another	☐ Judgmen	t lien from a lawsuit					
		f this claim relates to a unity debt	a	Other (inc	cluding a right to offset)					
Date de	ebt v	was incurred 2016		Last 4	4 digits of account numb	er <u>010</u>	7			
Add t	he c	dollar value of your en	tries in Col	lumn A on th	is page. Write that numl	per here:		\$176,384.	00	
		the last page of your fo t number here:	orm, add th	ne dollar valu	ue totals from all pages.			\$176,384.	00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	rmation to identify your	case:			
Debtor 1	Christopher Hols				
Debter 1	First Name	Middle Name	Last Name		
Debtor 2	Mary Ann Holsap	ple			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF NEW MEX	ICO		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106F/F				
		/ho Have Unsecur	ed Claims		12/15
any executory co Schedule G: Exec	ontracts or unexpired leases cutory Contracts and Unexp	that could result in a claim. A pired Leases (Official Form 106	Also list executory of GG). Do not include	contracts on Schedule A/B: any creditors with partially	NPRIORITY claims. List the other part: Property (Official Form 106A/B) and o y secured claims that are listed in t, number the entries in the boxes on the
	ontinuation Page to this pag umber (if known).	ge. If you have no information	to report in a Part,	do not file that Part. On the	top of any additional pages, write you
Part 1: List	All of Your PRIORITY Ur	secured Claims			
1. Do any cred	itors have priority unsecure	d claims against you?			
No. Go to	Part 2.				
☐ Yes.					
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cred	itors have nonpriority unsec	cured claims against you?			
☐ No. You h	nave nothing to report in this p	art. Submit this form to the cour	t with your other sche	edules.	
Yes.					
unsecured cl	aim, list the creditor separatel	y for each claim. For each claim	listed, identify what t	type of claim it is. Do not list	ditor has more than one nonpriority claims already included in Part 1. If more claims fill out the Continuation Page of
					Total claim
	/Directv	Last 4 digits o	f account number	4872	\$200.8
c/o I.C	rity Creditor's Name C. System, Inc. Dx 64378	When was the	debt incurred?	2018	
	Paul, MN 55164				
	Street City State Zip Code curred the debt? Check one.	As of the date	you file, the claim	is: Check all that apply	
_	tor 1 only				
	•	☐ Contingent			
_	tor 2 only	☐ Unliquidate	d		
	tor 1 and Debtor 2 only	☐ Disputed			
☐ At le	ast one of the debtors and an		RIORITY unsecure	d claim:	
	ck if this claim is for a com	•			
debt Is the cl	laim subject to offset?	☐ Obligations report as priori		aration agreement or divorce	that you did not
■ No	oubjoot to onsot?	<u></u>	•	ig plans, and other similar de	ebts
		·	cify services re		~
☐ Yes		Other, Spec	city services re	nuereu	

	mr 2 Mary Ann Holsapple	Case number (if known)	
4.2	Capital One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number 0362	\$655.00
	PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred? 2011	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
		<u> </u>	
4.3	Captial One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number 8924	\$822.82
	P O Box 30281	When was the debt incurred? 2017	_
	Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge Account	
4.4	Dept of Ed/Nel	Last 4 digits of account number 1797	\$4,500.00
4.4	Nonpriority Creditor's Name	Last 4 digits of account number 1737	<u> </u>
	3015 Parker Rd Suite 400	When was the debt incurred? 2013	_
	Aurora, CO 80014  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	■ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student Loan	_

Mary Ann Holsapple		· · · · · · · · · · · · · · · · · · ·	
Dept of Ed/NelNet	Last 4 digits of account number	2194	\$1,734.00
Nonpriority Creditor's Name 8015 Parker Rd Ste 400	When was the debt incurred?	2010	
Aurora, CO 80014  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	☐ Other. Specify		
	Student Lo	pan	
Dept of Ed/NelNet Nonpriority Creditor's Name	Last 4 digits of account number	8880	\$1,542.00
3015 Parker Rd Ste 400	When was the debt incurred?	2010	
Aurora, CO 80014			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Student Lo	pan	
Dept of Ed/NelNet Nonpriority Creditor's Name	Last 4 digits of account number	8880	\$2,918.00
3015 Parker Rd Ste 400	When was the debt incurred?	2010	
Aurora, CO 80014 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
	☐ Disputed		
Debtor 1 and Debtor 2 only		d claim:	
■ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans		
At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
At least one of the debtors and another  Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sepa		

	1 Christopher Holsapple 2 Mary Ann Holsapple		Case number (if known)	
	Dept of Ed/NelNet	Last 4 digits of account number	6742	\$3,500.00
	Nonpriority Creditor's Name 3015 Parker Rd Ste 400		2011	
_	Aurora, CO 80014  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another  ☐ Check if this claim is for a community	Student loans	a oranii.	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	☐ Other. Specify	<b>3</b> F,	
	L les	Student Lo	an	
	Dept of Ed/NelNet Nonpriority Creditor's Name	Last 4 digits of account number	1170	\$1,968.00
	3015 Parker Rd Ste 400	When was the debt incurred?	2012	
	Aurora, CO 80014	_		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.  □ Debtor 1 only			
	Debtor 2 only	☐ Contingent		
	_	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another		a Claim.	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts	
	La res	Student Lo	an	
4.1	Dept of Ed/NelNet	Last 4 digits of account number	9174	\$2,335.00
	Nonpriority Creditor's Name 3015 Parker Rd Ste 400	When was the debt incurred?	2013	
	Aurora, CO 80014  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Student Lo	an	

Dept of Ed/NelNet	Last 4 digits of account number	4613	\$2,256.00
Nonpriority Creditor's Name 3015 Parker Rd Ste 400	When was the debt incurred?	2014	
Ste 400 Aurora, CO 80014			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	<u></u> '	d Claim:	
■ Check if this claim is for a community debt	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify	<u> </u>	
	Student Lo		
David of Ed/MalNet		6440	¢4.405.00
Dept of Ed/NelNet Nonpriority Creditor's Name	Last 4 digits of account number	6442	\$4,105.00
3015 Parker Rd	When was the debt incurred?	2014	
Ste 400			
Aurora, CO 80014  Number Street City State Zip Code	As of the date you file, the claim	in Ohashall that analy	
Who incurred the debt? Check one.	As of the date you file, the claim	is: Спеск ан that арру	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Student loans		
■ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	☐ Other. Specify		
_ 166	Student Lo	an	
Danie of Editional		0070	£4 COO OO
Dept of Ed/NeINet Nonpriority Creditor's Name	Last 4 digits of account number	9670	\$1,608.00
3015 Parker Rd Ste 400	When was the debt incurred?	2015	
Aurora, CO 80014	- A		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
_	☐ Unliquidated☐ Disputed		
Dobtor 1 and Dobtor 2 only	Type of NONPRIORITY unsecured	d claim:	
Debtor 1 and Debtor 2 only			
At least one of the debtors and another	<u></u>		
	Student loans	aration agreement or divorce that you did not	
At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
☐ At least one of the debtors and another  ☐ Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sepa	·	

per 2064	\$1,608.00
	¥ -,000.00
2016	
im is: Check all that apply	
ured claim:	
separation agreement or divorce that you did not	
paring plans, and other similar debts	
Louis	
per 2064	\$8,403.00
2016	
in Charles What and	
IIM Is: Check all that apply	
ured claim:	
separation agreement or divorce that you did not	
naring plans, and other similar debts	
Loan	
per 2908	\$12,934.00
2016	
im is: Check all that apply	
urad alaimi	
ureu viaiiii.	
apparent on diverse the transition of	
separation agreement or divorce that you did not	
naring plans, and other similar debts	
	2016  aim is: Check all that apply  cured claim: separation agreement or divorce that you did not haring plans, and other similar debts  Loan  ber 2908

Dept of Ed/NelNet	Last 4 digits of account number	4829	\$5,097.00
Nonpriority Creditor's Name 3015 Parker Rd	When was the debt incurred?	2017	
Ste 400 Aurora, CO 80014			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Installment	Loan	
Fort Bliss FCU Nonpriority Creditor's Name	Last 4 digits of account number	1489	\$5,463.00
9983 Kenworthy St El Paso, TX 79924	When was the debt incurred?	2017	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify	Loan	
Government ECU El Paso		0039	\$1,067.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1,007.00
1225 Airways Blvd El Paso, TX 79925	When was the debt incurred?	2011	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	1	

Government ECU El Paso Nonpriority Creditor's Name	Last 4 digits of account number	2987	\$202.00
7227 Viscount Blvd El Paso, TX 79925-4801	When was the debt incurred?	2011	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only			
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	1 claim:	
<u></u>	Student loans	a Glaiiii.	
Check if this claim is for a community debt sthe claim subject to offset?		ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other Specify Line of Cre		
Government ECU EI Paso	Last 4 digits of account number	5737	\$15,106.00
Nonpriority Creditor's Name 7227 Viscount Blvd	When was the debt incurred?	2016	Ψ10,100.00
El Paso, TX 79925-4801			
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	_		
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	Unliquidated		
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.	
<u></u>	Student loans	o ciaim:	
Check if this claim is for a community debt sthe claim subject to offset?	_	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify Auto Loan		
Government Employees	Last 4 digits of account number	5737	\$4,485.00
Nonpriority Creditor's Name	_		
7227 Viscount El Paso, TX 79925	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Unsecured	Loan	

Soleton File Employees Credit   Last 4 digits of account number   6513   \$1,211.16	1 Christopher Holsapple 2 Mary Ann Holsapple		Case number (if known)	
A85 LBJ Freeway Site 750 Dallas, TX 75244 Number Site City Sites 2 place  Who incurred the debt? Check one.   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor and another   Debtor 1 and Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 4 and Debtor 4 only   Debtor 4 and Debtor 4 only   Debtor 4 and Debtor 5 only   Debtor 4 and Debtor 5 only   Debtor 4 and Debtor 5 only   Debtor 5 o	Union of El	Last 4 digits of account number	6513	\$1,211.16
Number Street City State 2 p Code   No incurred the debt? Check one.   Debtor 2 only   Debtor 3 only 2 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only 3 only 4 on	c/o Blalack & Williams 4851 LBJ Freeway Ste 750	When was the debt incurred?	2018	
Debtor 2 only	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Debtor 2 only	Debtor 1 only	☐ Contingent		
Debtor 1 and Debtor 2 only   Disputed   Check if this claim is for a community debt   Steep claim is for a	Debtor 2 only	_		
At least one of the debtors and another   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim subject to offset?   Check if this claim is for a community debt   Check if this claim is debt   Check if this claim is for a community debt   Check if this claim is for a commu	■ Debtor 1 and Debtor 2 only	<u> </u>		
Contingent   Con	☐ At least one of the debtors and another	•	d claim:	
debt Is the claim subject to offset?  No Debts to persion or profit-sharing plans, and other similar debts  Pyes  Collection Account    Collection Account	Check if this claim is for a community	☐ Student loans		
42   Content	debt		aration agreement or divorce that you did not	
Government Employees Credit Union of EI Nonpriority Creditor's Name CO Blatack & Williams 4851 LBJ Freeway Ste 750 Dallas, TX 75244 Number Street City State Zip Code Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Disputed   Debtor 1 and Debtor 2 only   Disputed   Type of NoNPRIORITY unsecured claim:   Student loans     No   Debts to pension or profit-sharing plans, and other similar debts   No   Debts to pension or profit-sharing plans, and other similar debts   No   Debts to pension or profit-sharing plans is Check all that apply   At least one of the debtors and another   Debts to pension or profit-sharing plans, and other similar debts   No   Debts to pension or profit-sharing plans, and other similar debts   No   Debts to pension or profit-sharing plans is Check all that apply   At least one of the debtors and another   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or prof	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Union of E   Last 4 digits of account number   8021   \$227.93	Yes	Other. Specify Collection	Account	
C/O Blalack & Williams 4851 LBJ Freeway Ste 750 Dallas, TX 75244 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim:  Student loans Debtor 4 specified by State Zip Code Who incurred the debt?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 specified by Student loans Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 only Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 and Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor	Union of El	Last 4 digits of account number	8021	\$227.93
Number Street City State Zip Code   Who incurred the debt? Check one.   Debtor 1 only   Debtor 1 only   Debtor 2 only   Unliquidated   Disputed   Type of NONPRIORITY unsecured claim:   Student loans   debt   Stee Claim subject to offset?   State Zip Code   Nonpriority Creditor's Name   P O Box 660873   Dallas, TX 75266   Number Street City State Zip Code   Who incurred the debtors and another   Debtor 1 only   Debtor 2 only   Disputed   Student loans   Student loans   Student loans   Student loans   Student loans   Dolligations arising out of a separation agreement or divorce that you did not report as priority claims   Oligations arising out of a separation agreement or divorce that you did not report as priority claims   Oligations arising out of a separation agreement or divorce that you did not report as priority claims   Oligations arising out of a separation agreement or divorce that you did not report as priority claims   Student loans	c/o Blalack & Williams 4851 LBJ Freeway Ste 750	When was the debt incurred?	2018	
Contingent Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 3 only Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Collection Account  4.2 S Hospitals of Providence Nonpriority Creditor's Name P O Box 660873 Dallas, TX 75266 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts PO Box 660873 Dallas, TX 75266 Number Street City State Zip Code Who incurred the debt? Check one. Debts 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Account  When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts	☐ Debtor 1 only	☐ Contingent		
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Collection Account  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  Debts to pension or profit-sharing plans, and other similar debts  Collection Account  8225  \$147.00  \$147.00  As of the date you file, the claim is: Check all that apply  Unliquidated  Debtor 1 and Debtor 2 only  Disputed  Type of NONPRIORITY unsecured claim:  Check if this claim is for a community debt  Is the claim subject to offset?  Debts to pension or profit-sharing plans, and other similar debts	Debtor 2 only			
At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  At least one of the debtors and another  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  report as priority claims  Po Box 660873  Dallas, TX 75266  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Type of NONPRIORITY unsecured claims  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Type of Nonpriority claims  Debts to pension or profit-sharing plans, and other similar debts	■ Debtor 1 and Debtor 2 only			
Check if this claim is for a community debt   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Other. Specify   Collection Account	☐ At least one of the debtors and another	•	d claim:	
debt Is the claim subject to offset? In No In Debts to pension or profit-sharing plans, and other similar debts In No In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Ot	Check if this claim is for a community	_		
Hospitals of Providence Nonpriority Creditor's Name P O Box 660873 Dallas, TX 75266 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  Contingent Debtor 4 are priority claims Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 and Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 only De	debt		aration agreement or divorce that you did not	
Hospitals of Providence Nonpriority Creditor's Name P O Box 660873 Dallas, TX 75266 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No No  Last 4 digits of account number 8225  When was the debt incurred? 2013  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Nonpriority Creditor's Name P O Box 660873 Dallas, TX 75266 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No  No Debts to pension or profit-sharing plans, and other similar debts  Last 4 digits of account number 0225  \$147.00	Yes	Other. Specify Collection	Account	
P O Box 660873 Dallas, TX 75266  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Student loans Debtor 3 only Disputed Type of NonPriority unsecured claim: Debtor 4 only Disputed Disputed Type of NonPriority unsecured claim: Debtor 5 only Debts to pension or profit-sharing plans, and other similar debts		Last 4 digits of account number	8225	\$147.00
Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Debts up a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	P O Box 660873	When was the debt incurred?	2013	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	☐ Debtor 1 only	Пол		
□ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	Debtor 2 only	_		
□ At least one of the debtors and another  □ Check if this claim is for a community debt Is the claim subject to offset?  □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	_	<u> </u>		
Check if this claim is for a community debt  Is the claim subject to offset?  ■ No  Student loans  □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  □ Debts to pension or profit-sharing plans, and other similar debts		•	d claim:	
debt	_	<u></u> '		
■ No □ Debts to pension or profit-sharing plans, and other similar debts	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
· · · · · · · · · · · · · · · · · · ·			g plans, and other similar debts	
	Yes	■ Other. Specify Collection	Account - Medical Expense	

	or 1 Christopher Holsapple or 2 Mary Ann Holsapple	Case number (if known)			
4.2 6	Hospitals of Providence	Last 4 digits of account number	1527	\$825.00	
	Nonpriority Creditor's Name P O Box 660873	When was the debt incurred?	2013		
	Dallas, TX 75266  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Collection	Account - Medical Expense		
4.2	NM ED ASST	Last 4 digits of account number	90PE	\$5,000.00	
<u>'</u>	Nonpriority Creditor's Name 7400 Tiburon St. NE	When was the debt incurred?	2012		
	Albuquerque, NM 87109  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.		or chook an inat appry		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	☐ Yes	☐ Other. Specify			
		Student Lo	an		
1.2 3	Security Finance Nonpriority Creditor's Name	Last 4 digits of account number	unknown	\$1,200.00	
	2001 E Lohman Ste 131 Las Cruces, NM 88001	When was the debt incurred?	2018		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separe report as priority claims</li> </ul>	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts		
	□ Yes	Other. Specify signature	• •		
	<b>—</b> 163	Other. Specify	~····		

Nonpriority Creditor's Name   2018   Las Cruces, NM 88001	CP Last	4 digits of account number	unknown	\$1,200
Las Cruces, NM 88001 Number Street City State Zip Code Who incurred the debt? Check one.    Debtor 1 and Debtor 2 only   Check this claim is for a community debt is the claim subject to offset?   As of the date you file, the claim is: Check all that apply		4 digits of account number		Ψ1,200
Who incurred the debt? Check one.    Debtor 1 only   Debtor 2 only   Disputed     Check if this claim is for a community debt     No   Debtor 1 and Debtor 2 only   Disputed     Yes   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only     Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 6 only   Debtor 7 only   Debtor 6 only   Debtor 7 only   Debtor 8 only   Debtor 8 only   Debtor 9 only 0 on		n was the debt incurred?	2018	
Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of MONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts SYNCB/ Amazon PLCC Last 4 digits of account number SYNCB/ Amazon PLCC Nonpriority Creditor's Name PO Box 95015 Orlando, FL 32896-5015 Norlando, FL 32896-5015 Orlando, FL 32896-5015 Orlando, FL 32896-5015 Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debtor 1 only Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other s	•	f the date you file, the claim i	is: Check all that apply	
Debtor 2 only		Contingent		
At least one of the debtors and another   Type of NONPRIORITY unsecured claim:   Student loans   Student lo		=		
Check if this claim is for a community debt is the claim subject to offset?  □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Signature loan □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Signature loan □ Debtor Nonpriority Creditor's Name □ Other. Specify Signature loan □ Other. Specify Signature loan □ Debtor Nonpriority Creditor's Name □ Debtor 1 only □ Contingent □ Unliquidated □ Debtor 2 only □ Debtor 2 only □ Debtor 3 and Debtor 4 and Debtor 3 and Debtor 4 and Debtor 5 and Debtor 5 and Debtor 4 and Debtor 5	btor 2 only	Disputed		
Obligations arising out of a separation agreement or divorce that you did not report as priority claims	e debtors and another Type	of NONPRIORITY unsecured	d claim:	
SyncB   California State   Cal	aim is for a community	tudent loans		
SYNCB/ Amazon PLCC Last 4 digits of account number 5187  PO Box 965015 Orlando, FL 32896-5015 Number Street City State Zip Code When was the debt incurred? 2014  As of the date you file, the claim is: Check all that apply    Debtor 1 only			aration agreement or divorce that you did not	
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Orlando, FL 32896-5015		4 digito of doodant number		*
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☐ At least one of the debtors and another       Type of NONPRIORITY unsecured claim:         ☐ Check if this claim is for a community debt       ☐ Student loans         ☐ No       ☐ Debts to pension or profit-sharing plans, and other similar debts         ☐ Yes       ☐ Other. Specify         Charge Account     SYNCB/Car Care Disc Tire  Nonpriority Creditor's Name  P O Box 965001  Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.       When was the debt incurred? 2013  As of the date you file, the claim is: Check all that apply         ☐ Debtor 1 only       ☐ Contingent         ☐ Debtor 2 only       ☐ Unliquidated         ☐ Debtor 1 and Debtor 2 only       ☐ Disputed         ☐ At least one of the debtors and another       ☐ Student loans         ☐ Check if this claim is for a community debt       ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	ht 0	·		
□ Check if this claim is for a community debt  Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Charge Account  SYNCB/Car Care Disc Tire Nonpriority Creditor's Name PO Box 965001 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?  Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		•	d claim:	
debt Is the claim subject to offset?  In No				
□ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify		Obligations arising out of a sepa	aration agreement or divorce that you did not	
□ Yes □ Other. Specify Charge Account SYNCB/Car Care Disc Tire   Last 4 digits of account number   3608   \$2 Nonpriority Creditor's Name   P O Box 965001   When was the debt incurred?   2013	<u>.</u>	• •		
SYNCB/Car Care Disc Tire  Nonpriority Creditor's Name P O Box 965001 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  Last 4 digits of account number 3608  S2 When was the debt incurred? 2013  Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and policy are port as priority claims		ebts to pension or profit-sharing	ng plans, and other similar debts	
Nonpriority Creditor's Name P O Box 965001 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  When was the debt incurred? 2013  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		other. Specify Charge Acc	count	
P O Box 965001 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Street City State Zip Code Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset?	re Disc Tire Last	4 digits of account number	3608	\$2,548
Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 1 and Debtor 5 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 8 only Debtor 1 and Debtor 9 only Debtor 1 and			-	
As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 1 and Debtor 5 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 8 only Debtor 1 and Debtor 9 only Debto		n was the debt incurred?	2013	
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		f the date you file, the claim	is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	lebt? Check one.			
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Contingent		
■ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another ■ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		-		
■ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		·		
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	e debtors and another Type	of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset? report as priority claims	nim is for a community $\Box$ S	tudent loans		
	□ (		aration agreement or divorce that you did not	
Debte to pension as a self-to-be and estimation about	·		an plane and other similer delet	
<ul> <li>■ No</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Yes</li> <li>□ Charge Account</li> </ul>				

SYNCB/Care Credit	Last 4 digits of account number	<u>2173</u>	\$623.00
Nonpriority Creditor's Name P OBxo 965036 Orlando, FL 32896	When was the debt incurred?	2010	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	По :: .		
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
<u></u>	Student loans	d Oldini.	
Check if this claim is for a community debt sthe claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	■ Other Specify Charge Acc	count	
SYNCB/Lowes	Last 4 digits of account number	2067	\$501.00
Nonpriority Creditor's Name P O Box 965005	When was the debt incurred?	2015	*******
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim i	in Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim i	в. Спеск ан так арргу	
Debtor 1 only	По и		
☐ Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans	a ciaiii.	
the claim subject to offset?	_	aration agreement or divorce that you did not	
- No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
SYNCB/Lowes	Last 4 digits of account number	2067	\$1,152.00
Nonpriority Creditor's Name P O Box 965005	When was the debt incurred?	2015	
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, to or the date you me, the claim.	o. Oncor an inat appry	
Debtor 1 only	D 0		
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc		

SYNCB/Sams Club	Last 4 digits of account number	0622	\$537.00
Nonpriority Creditor's Name P O Box 965005 Orlando, FL 32896	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Syncb/Syncb Nations Nonpriority Creditor's Name	Last 4 digits of account number	6464	\$728.00
P O Box 965036 Orlando, FL 32896-5036	When was the debt incurred?	2014	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.  Debtor 1 only			
Debtor 2 only	Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No No	Debts to pension or profit-sharin		
☐ Yes	Other. Specify Charge Acc	count	
SYNCHRONY Bank/Sam's	Last 4 digits of account number	4517	\$777.25
Nonpriority Creditor's Name P O Box 965003 Orlando, El 23806 5003	When was the debt incurred?	2018	
Orlando, FL 32896-5003 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	, ,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Collection	Account	

		ner Holsapple Holsapple		Case r	number (if kr	nown)	
4.3 8 TM	lobile		Last 4 digits of account numbe	<sub>r</sub> 5410	)		\$1,348.00
Nor c/o P (	Diversif D Box 55	ditor's Name ied Consultants 1268	When was the debt incurred?	2017	7		
	/I 54100	City State Zip Code	As of the date you file the eleir	n io. Chas	al all that any	ah.	
		the debt? Check one.	As of the date you file, the clair	n is: Chec	ж ан тпат арг	ыу	
	Debtor 1 onl						
_	Debtor 2 onl	•	☐ Contingent				
_		d Debtor 2 only	☐ Unliquidated				
		•	Disputed				
_		of the debtors and another	Type of NONPRIORITY unsecu	rea ciaim:	:		
deb	ot	s claim is for a community	☐ Student loans ☐ Obligations arising out of a se	paration a	greement or	divorce that you did not	
_		bject to offset?	report as priority claims		1		
<b>=</b> 1			☐ Debts to pension or profit-sha	•			
	Yes		Other. Specify Collection	1 Accou	ınt - Serv	ices Rendered	
			ebt That You Already Listed				
is trying to have more	collect fro than one o	m you for a debt you owe to s	about your bankruptcy, for a debt that someone else, list the original creditor lat you listed in Parts 1 or 2, list the ad or submit this page.	in Parts 1	1 or 2, then I	list the collection agency here.	Similarly, if you
	ce Advar	itage, LLC		☐ Part 1:	: Creditors w	ith Priority Unsecured Claims	
205 Bryar Amherst,				Part 2:	: Creditors w	ith Nonpriority Unsecured Claims	
, , , , , , , , , , , , , , , , , , ,	141 1422	•	Last 4 digits of account number	6	985		
Name and A	ddraaa		On which entry in Dort 1 or Dort 2 did w	au liat tha	original aradi	itorO	
Patenaud			On which entry in Part 1 or Part 2 did you Line <b>4.37</b> of ( <i>Check one</i> ):		ū	ith Priority Unsecured Claims	
4545 Mur	phy Cany	on Road, 3rd		_		ith Nonpriority Unsecured Claims	
Floor	- 04.004	100					
San Diego	0, CA 921	123	Last 4 digits of account number	5	761		
Part 4:	Add the Aı	mounts for Each Type of U	Insecured Claim				
6. Total the a		certain types of unsecured cl	aims. This information is for statistica	l reporting	g purposes	only. 28 U.S.C. §159. Add the a	mounts for each
						Total Claim	
Total		Domestic support obligation	ns	6a.	\$	0.00	
claims	3						
from Part 1		Taxes and certain other deb		6b.	\$	0.00	
	6c. 6d.		If injury while you were intoxicated assecured claims. Write that amount here.	6c. 6d.	\$	0.00	
	ou.	Other. Add all other priority di	isecured claims. Write that amount here.	ou.	\$	0.00	
	6e.	Total Priority. Add lines 6a th	arough 6d	6e.	\$	0.00	
	00.	rotal i flority. Add lines oa ti	nough ou.	00.	Φ	0.00	
						Total Claim	
	6f.	Student loans		6f.	\$	54,411.00	
Total claims							
from Part 2			separation agreement or divorce that	6-	¢.	0.00	
	6h.	you did not report as priorit Debts to pension or profit-s	y claims haring plans, and other similar debts	6g. 6h.	\$ \$	0.00	
	6i.		ty unsecured claims. Write that amount	6i.	· —		
		here.			\$	46,850.02	
		Total Nonpriority. Add lines		6j.	\$	101,261.02	

Official Form 106 E/F

Fill in this information to identify your case:							
Debtor 1	Christopher Hols						
	First Name	Middle Name	Last Name				
Debtor 2	Mary Ann Holsap						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW MEXICO					
Case number (if known)					☐ Check if this is an amended filing		

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for				
2.1									
	Name								
	Number	Street							
	City		State	ZIP Code					
2.2									
	Name								
	Number	Street							
	City		State	ZIP Code	_				
2.3	Oity		Olato	Zii Oddo					
	Name								
	Number	Street			_				
	City		State	ZIP Code	<del>_</del>				
2.4	<u> </u>		<u> </u>						
	Name				_				
	Number	Street			_				
	City		State	ZIP Code	_				
2.5	Oity		Olalo	211 0000					
	Name				_				
	Number	Street			_				
	City		State	ZIP Code	_				

				_	
Fill in this info	ormation to identify your	case:			
Debtor 1	Christopher Hols	apple			
<b>.</b>	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Mary Ann Holsap	Middle Name	Last Name		
	Danilius interio Carret fair than	DISTRICT OF NEW MEYIC	20		
United States	Bankruptcy Court for the:	DISTRICT OF NEW MEXIC	,0		
Case number					
(if known)					Check if this is an
					amended filing
Official F	orm 106H				
	e H: Your Cod	ehtors			12/15
<del>Jonioaai</del>		001010			12/13
people are filir ill it out, and r your name and	ng together, both are equ number the entries in the d case number (if known	ally responsible for supplying	ng correct informat e Additional Page t	tion. If more space is no to this page. On the top	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
■ No					
☐ Yes					
		I lived in a community property Nevada, New Mexico, Puerto			states and territories include
	ramonna, raano, <b>zo</b> aroiana	,	ruce, rende, ruc	g.c, and moscillani,	
□ No. Go					
■ Yes. Di	d your spouse, former spo	use, or legal equivalent live wit	th you at the time?		
	No				
 ■ \					
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name an	d current address of that person.
				<del></del>	
	Name of your spouse, former sp				
	Number, Street, City, State & Zip	) Code			
in line 2 a	igain as a codebtor only D), Schedule E/F (Officia	f that person is a guarantor	or cosigner. Make	sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	umn 1: Your codebtor e, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	<b>a</b>
Name	е			☐ Schedule E/F, li	
				☐ Schedule G, line	
Numl	ber Street			_	
City		State	ZIP Code		
3.2				☐ Schedule D, line	<b>,</b>
Name	e			☐ Schedule E/F, li	
				☐ Schedule G, line	
Numl	ber Street			_	
City		State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
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Case 19-10889-j7 Doc 1 Filed 04/18/19 Entered 04/18/19 13:06:19 Page 35 of 49

Fill	in this information to ident	tify your ca	ase:								
Del	btor 1 Chri	Christopher Holsapple				_					
	btor 2 Mary Ann Holsapple ouse, if filing)					_					
Uni	ited States Bankruptcy Co	urt for the	DISTRICT OF NEW M	IEXICO		_					
Case number ((If known)							Check if this is:  An amended filing A supplement showing postpetition chapter 13 income as of the following date:				
0	fficial Form 106	<u> 31</u>					MM / DE	)/ YYYY	-		
S	chedule I: You	ır Inco	ome								12/15
spo atta	plying correct information use. If you are separated that a separate sheet to the separate sheet she sheet she	d and you nis form. (	r spouse is not filing wi	th you, do not inclu	ıde infor	mati	on about your	spouse.	lf n	nore space is	needed,
	information.			Debtor 1			Debto	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	with	Employment status	■ Employed  □ Not employed				■ Employed  □ Not employed			
	employers.		Occupation				Gene	General Manager			
	Include part-time, seaso self-employed work.	onal, or	Employer's name	ElWood Staffin	g		HMR	Pretzle	es		
	Occupation may include or homemaker, if it appli		Employer's address								
	How long employed there? 1mo					4 yrs					
Pai	Give Details A	bout Mon	thly Income								
	imate monthly income as use unless you are separa		ate you file this form. If y	ou have nothing to r	report for	any	ine, write \$0 in	the space	e. lı	nclude your nor	n-filing
	ou or your non-filing spouse e space, attach a separate			mbine the information	on for all e	emplo	oyers for that pe	rson on t	the	lines below. If	you need
							For Debtor 1			ebtor 2 or iling spouse	
2.		nthly gross wages, salary, and commissions (be ns). If not paid monthly, calculate what the monthly			2.	\$	2,053.2	<b>6</b> \$_		3,333.20	
3.	Estimate and list monthly overtime pay.				3.	+\$	0.0	<u>0</u> +\$	_	0.00	
4.	Calculate gross Income. Add line 2 + line 3.			4.	\$	2,053.26	\$	 B	3,333.20		

Debtor 1 Debtor 2 Christopher Holsapple Mary Ann Holsapple

Case number (if known)

				For I	Debtor 1	For Debt	or 2 or g spouse	
	Сору	y line 4 here	4.	\$	2,053.26	\$	3,333.20	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	157.65	\$	311.72	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	241.41	\$	17.70	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	399.06	\$	329.42	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,654.20	\$	3,003.78	
8.	8b. 8c. 8d. 8e. 8f.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8a. 8b. 8c. 8d. 8e.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00	
		Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	٠ ٠	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	0. \$	1	,654.20 + \$_	3,003.7	<b>'8</b> = \$	4,657.98
11.	Includ other	e all other regular contributions to the expenses that you list in <i>Schedule</i> and de contributions from an unmarried partner, members of your household, your or friends or relatives.  The following that are not a sifty:	depen			ed in <i>Sched</i>	lule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines				if it	2. \$Combin	
13.	Do ye	ou expect an increase or decrease within the year after you file this form?	•				monthly	income
		Yes. Explain:						
								-

Fill i	in this informa	ation to identify yo	ur case:						
Deb	tor 1	Christopher	Holsapp	le		Ch	neck i	if this is:	
		•	•					n amended filing	
	tor 2 ouse, if filing)	Mary Ann Ho	Isapple						ving postpetition chapter the following date:
(Spc	Juse, ii iiiiig)							oxponede de el	
Unite	ed States Bank	ruptcy Court for the:	DISTRI	CT OF NEW MEXICO			MI	M / DD / YYYY	
1	e number								
(II KI	nown)								
Of	ficial Fo	orm 106J							
		J: Your E	Exper	ises					12/1
Be a	as complete ormation. If n	and accurate as	possible eded, atta	. If two married people a ich another sheet to this					or supplying correct
Part		ribe Your House	hold						
1.	Is this a joi  ☐ No. Go to								
		o line 2. es Debtor 2 live i	n a senar	ate household?					
	= 100. <b>B</b> 0.		n a sepai	ate nousenoid.					
			t file Offici	ial Form 106J-2, <i>Expense</i>	s for Separate House	hold of D	ebtor	2.	
2.	Do you hay	e dependents?	□ No	•	·				
۷.	•	Debtor 1 and	_	Fill out this information for	Dependent's relati	onshin to		Dependent's	Does dependent
	Debtor 2.	Debior Fand	Yes.	each dependent	Debtor 1 or Debtor		_	age	live with you?
	Do not state	e the							□ No
	dependents	names.			Son			17	Yes
					Son			22	□ No
					3011				■ Yes □ No
					Daughter			23	■ Yes
									□ No
2	Da		_						☐ Yes
3.		penses include of people other th	nan _	No					
	yourself an	d your depender	nts? ⊔	Yes					
	imate your e		our bankr	uptcy filing date unless					
	enses as of licable date.		ankrupto	y is filed. If this is a sup	plemental <i>Schedul</i> e	J, check	the	box at the top o	f the form and fill in the
				government assistance					
	icial Form 10		a nave inc	cluded it on Schedule I:	Your income			Your expe	enses
4.		or home owners! nd any rent for the		ises for your residence. or lot.	Include first mortgage	4.	\$_		1,250.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
	•	erty, homeowner's				4b.	- : -		0.00
		e maintenance, re eowner's associati				4c. 4d.			200.00
5.				our residence, such as ho	ome equity loans		\$ -		0.00

page 1

	tor 1	Christopher Holsapple Mary Ann Holsapple	Case num	ber (if know	vn)
6.	Utilit		60	<b>c</b>	245.00
	6a.	Electricity, heat, natural gas	6a.		215.00
	6b.	Water, sewer, garbage collection	6b.		65.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· —	0.00
	6d.	Other. Specify: Cell phone	6d.	·	250.00
		Internet		\$	65.00
7.		and housekeeping supplies	7.	·	900.00
8.	-	dcare and children's education costs	8.	\$	50.00
9.		ning, laundry, and dry cleaning	9.	· —	250.00
		onal care products and services	10.	\$	200.00
		ical and dental expenses	11.	\$	200.00
12.		sportation. Include gas, maintenance, bus or train fare.	10	¢.	350.00
40		ot include car payments.	12.		
		rtainment, clubs, recreation, newspapers, magazines, and books	13.		56.00
		itable contributions and religious donations	14.	\$	20.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.  Life insurance	15a.	<b>¢</b>	36.50
		Health insurance		·	
			15b.		0.00
		Vehicle insurance	15c.	·	286.00
4.0		Other insurance. Specify:	15d.	\$	0.00
	Spec	· · · · · · · · · · · · · · · · · · ·	16.	\$	0.00
17.		Illment or lease payments:	17a.	¢	245.00
		Car payments for Vehicle 1			345.00
		Car payments for Vehicle 2	17b.	· —	0.00
		Other. Specify: School Payment NMSU	17c.		100.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10		acted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Fr payments you make to support others who do not live with you.	10.	\$ ——	0.00
19.	Spec		19.	Ψ	0.00
20		er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Incom	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	· <u> </u>	0.00
		Property, homeowner's, or renter's insurance	20c.		
		· ·	20d.	·	0.00
		Maintenance, repair, and upkeep expenses  Homeowner's association or condominium dues			0.00
0.4			20e.		0.00
21.	Otne	r: Specify:	21.	+\$	0.00
22.	Calc	ulate your monthly expenses			
		Add lines 4 through 21.		\$	4,838.50
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	,
		Add line 22a and 22b. The result is your monthly expenses.		\$	4,838.50
	220.	Add line 22a and 22b. The result is your monthly expenses.		Ψ	4,030.30
23.		ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,657.98
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,838.50
					<u>,                                      </u>
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-180.52
24.	For exmodif	ou expect an increase or decrease in your expenses within the year after yo kample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?			increase or decrease because of a
	■ N				
	☐ Ye	es. Explain here:			

Fill in this inform	nation to identify your	case:		
Debtor 1	Christopher Hols	• •		_
<b>5</b> 6	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Mary Ann Holsap	ple Middle Name	Last Name	_
(Spouse II, IIIIIIg)	Filst Name	iviluale Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NEW MEX	ICO	_
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Form	n 106Dec			
Declarati	ion About a	n Individual	Debtor's Schedule	S 12/15
f two married pe	ople are filing togethe	r, both are equally respons	sible for supplying correct information	on.
				e statement, concealing property, or 250,000, or imprisonment for up to 20
	B U.S.C. §§ 152, 1341, 1		upicy case can result in fines up to \$	250,000, or imprisonment for up to 20
,	33 10-, 1011,			
Sign	Below			
Did you pay	or agree to pay some	one who is NOT an attorn	ey to help you fill out bankruptcy for	ns?
■ No				
☐ Yes. N	lame of person		Attac	h Bankruptcy Petition Preparer's Notice,
_				aration, and Signature (Official Form 119)
Under nenek	ty of porium, I dooloro	that I have road the cumm	ary and cahadulas filed with this day	Jaratian and
	true and correct.	that I have read the Summ	ary and schedules filed with this dec	ciaration and
	stopher Holsapple		X /s/ Mary Ann Holsapple	l .
	pher Holsapple		Mary Ann Holsapple	
Signature	e of Debtor 1		Signature of Debtor 2	
Date A	pril 18, 2019		Date <b>April 18, 2019</b>	
	.p 10, <b>=</b> 010			

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

-H	ll in this informa	ation to identify you	r. c.250;			
	ebtor 1	Christopher Hol				
	DIOI I	First Name	Middle Name	Last Name		
1 1	ebtor 2 ouse if, filing)	Mary Ann Holsa	pple Middle Name	Last Name		
'						
Ur	nited States Banl	kruptcy Court for the:	DISTRICT OF NEW MEX	ICO		
1	ase number				_	Check if this is an amended filing
	fficial For		Affairs for Indivic	luals Filing for B	ankruptcv	4/19
Be info	as complete ar	nd accurate as possi	ible. If two married people a attach a separate sheet to	re filing together, both are	equally responsible for sur	
Pa	rt 1: Give De	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	Married					
	□ Not marri	ed				
2.	During the las	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
		all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	I.	
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
	104 Tierra \ Santa Teres	/ista sa, NM 88008	From-To: <b>July 2016- Jul</b> <b>2017</b>	Same as Debtor	1	Same as Debtor 1 From-To:
	tes and territorie  ☐ No ☐ Yes. Mak	s include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ner medule H: Your Codebtors (Of r Income	vada, New Mexico, Puerto R		
4.	Fill in the total If you are filing  No	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part	-time activities.	ndar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,548.49	■ Wages, commissions, bonuses, tips	\$9,696.70
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 1

	lary Ann Hols						
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of in Check all that		Gross income (before deductions and exclusions)
For last cale (January 1 to	ndar year: o December 31,	2012	■ Wages, commissions, bonuses, tips \$17,542.00		<b>0</b> ■ Wages, co		\$44,099.00
		[	Operating a business		☐ Operating	a business	
	ndar year befor December 31,	2017 \	Wages, commissions, conuses, tips	\$17,000.0	<b>0</b> ■ Wages, co		\$44,000.00
		[	☐ Operating a business		☐ Operating	a business	
■ No □ Yes	. Fill in the detai	D	Debtor 1	Gross income from	Debtor 2	noomo	Grace income
	. Fill in the detai	ls.					
			ebtor 1 sources of income	Gross income from	Debtor 2 Sources of in	ncome	Gross income
		_	Pescribe below.	each source (before deductions and exclusions)	Describe belo		(before deductions and exclusions)
Part 3: Lis	st Certain Paym	ents You Ma	ade Before You Filed for	Bankruptcv			
6. Are eithe □ No.	Neither Debt individual prin During the 90 No. G Yes L	or 1 nor Deb narily for a pe days before to to line 7. ist below each aid that credit ot include pa	debts primarily consumerator 2 has primarily consumersonal, family, or household you filed for bankruptcy, district to whom you painter. Do not include paymenty ments to an attorney for the 14/01/22 and every 3 years	umer debts. Consumer de Id purpose."  d you pay any creditor a to d a total of \$6,825* or mo ats for domestic support of his bankruptcy case.	otal of \$6,825* or m re in one or more p bligations, such as	nore? eayments and t child support a	he total amount you and alimony. Also, do
	•	•	ooth have primarily consu	ımer debts.		·	
Yes			you filed for bankruntoy di	d you hav any creditor a to			
■ Yes	During the 90	days before	you filed for bankruptcy, di	d you pay any creditor a t	otal of \$600 of mor	e <i>r</i>	
■ Yes	During the 90  No. G  Yes L ir	days before to to line 7. ist below each	you filed for bankruptcy, di ch creditor to whom you pai ents for domestic support o is bankruptcy case.	d a total of \$600 or more	and the total amou	nt you paid tha	
	During the 90  No. G  Yes L ir	days before to to line 7. ist below each clude payme ttorney for th	ch creditor to whom you pai	d a total of \$600 or more abligations, such as child s	and the total amou upport and alimony	nt you paid tha ⁄. Also, do not	

BMW Financial Services  P O Box 3608 Dublin, OH 43016  April 2019 3 x 345 = 1035  March 2019 4,035.00 \$17,076.00 □ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	P O Box 3608	March 2019 April 2019	\$1,035.00	\$17,076.00	■ Car □ Credit Card □ Loan Repayment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Debtor 2	Christopher Holsapple Mary Ann Holsapple		Ca	se number (if known)		
Cree	ditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
PΟ	HOUSING AGENCY Box 7899 se, ID 83707	February 2019 March 2019 April 2019 3 x 1250 = 3750	\$3,750.00	\$159,308.00	■ Mortgage □ Car □ Credit Car □ Loan Repa □ Suppliers □ Other	ayment
<i>Insid</i> of wh	in 1 year before you filed for bankru ers include your relatives; any general ich you are an officer, director, person siness you operate as a sole proprietor iny.	partners; relatives of any ge in control, or owner of 20%	neral partners; partn or more of their votin	erships of which you	ou are a general ny managing ag	partner; corporation ent, including one fo
	No					
	Yes. List all payments to an insider.					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
	No Yes. List all payments to an insider	Day of the same of	T-1-1		D	
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t Include credit	
Part 4:	Identify Legal Actions, Repossessi	ons. and Foreclosures				
List a modi	in 1 year before you filed for bankru Ill such matters, including personal inju fications, and contract disputes. No Yes. Fill in the details.					
	e title e number	Nature of the case	Court or agency	1	Status of the	case
Syn v Mar	chrony Bank y Holsapple 07-CV-2018-02013		Third Judicial	District Court	☐ Pending ☐ On appea ☐ Conclude	
	in 1 year before you filed for bankru k all that apply and fill in the details be		perty repossessed,	foreclosed, garnis	shed, attached,	seized, or levied?
_	No. Go to line 11. Yes. Fill in the information below.					
Cree	ditor Name and Address	Describe the Property  Explain what happene		Date		Value of the property
acco	in 90 days before you filed for bankr unts or refuse to make a payment b No		cluding a bank or fi	nancial institution	n, set off any ar	nounts from your
	Yes. Fill in the details.  ditor Name and Address	Describe the action th	e creditor took	Date	action was	Amount
				taker	1	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Christopher Holsapple Mary Ann Holsapple		Case number	(if known)	
12.	court	n 1 year before you filed for bankru- -appointed receiver, a custodian, o No (es		as any of your property in the possession of an a er official?	assignee for the bene	efit of creditors, a
Par	t 5:	List Certain Gifts and Contribution	าร			
13.		n 2 years before you filed for bank	ruptcy. d	id you give any gifts with a total value of more th	nan \$600 per person'	?
10.	_	No	шриоу, ш	,	Tan your per person	•
		es. Fill in the details for each gift.				
		with a total value of more than \$60 person	00	Describe the gifts	Dates you gave the gifts	Value
	Pers Addr	on to Whom You Gave the Gift and ress:	I			
14.	<b>I</b>	n 2 years before you filed for banki No Yes. Fill in the details for each gift or o	, ,	id you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts more Char	or contributions to charities that than \$600 ity's Name ress (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
15.	or ga	n 1 year before you filed for bankrumbling? No Yes. Fill in the details.	iptcy or s	since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,
		cribe the property you lost and the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	+ 7·	List Certain Payments or Transfer		ce dains on line 33 of <i>Schedule Arb. Froperty</i> .		
	Within consu	n 1 year before you filed for bankru ulted about seeking bankruptcy or	ıptcy, dic preparin	d you or anyone else acting on your behalf pay og a bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you
	Addr Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not \	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Asso 1111 Las	Offices of Kenneth G. Egan & oc. I E. Lohman Ave. Cruces, NM 88001 egan@yahoo.com		Attorney Fees		\$991.00
	Cou	nseling Class				\$30.00

Debte Debte		ristopher Holsapple ary Ann Holsapple				Case num	nber (if known)	
p	promised	rear before you filed for bankrup to help you deal with your credi lude any payment or transfer that y	itors o	r to make paymen			oay or transfer any prope	rty to anyone who
	<b>-</b>							
	■ No □ Yes	Fill in the details.						
-		Vho Was Paid		Description and	value of any pro	norty	Date payment	Amount of
	Address			transferred	value of any pro	эрсту	or transfer was made	payment
t lı iı [	ransferrence nclude bonclude gif	rears before you filed for bankrued in the ordinary course of your oth outright transfers and transfers that you have alre	<b>busin</b> made a	ess or financial at as security (such as	fairs? s the granting of a			
	100.	Fill in the details.		5		_	.,	<b>D</b>
	Person v Address	Vho Received Transfer		Description and property transfe		paym	ibe any property or ents received or debts n exchange	Date transfer was made
		relationship to you						
	unknow 5771 Ric Santa To			Sold Home for owed \$96,000 attorney got \$	had to pay			
	none							
_	Yes.  Name of	Fill in the details.  trust		Description and	value of the pro	perty trans	sferred	Date Transfer was made
Part	8: List	of Certain Financial Accounts,	Instrui	ments, Safe Depos	sit Boxes, and St	torage Unit	ts	
s l: h	sold, mov nclude ch nouses, p No	rear before you filed for bankrup red, or transferred? hecking, savings, money market tension funds, cooperatives, ass Fill in the details.	, or ot	her financial acco	unts; certificates	s of deposi		
_	00.	Financial Institution and	La	st 4 digits of	Type of acco	unt or	Date account was	Last balance
		(Number, Street, City, State and ZIP		count number	instrument	unt or	closed, sold, moved, or transferred	before closing or transfer
	Firstligh PO Box El Paso		XX	xx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other	rket	and savings. February 2019	\$0.00
		ow have, or did you have within other valuables?	1 year	before you filed fo	or bankruptcy, a	ny safe de <sub>l</sub>	posit box or other depos	itory for securities,
] [	■ No □ Yes.	Fill in the details.						
		Financial Institution		Who else had a	ccess to it?	Describe	the contents	Do you still
	Address	(Number, Street, City, State and ZIP Code)		Address (Number State and ZIP Code)	Street, City,			have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22.	Have you stored property in a storage unit or p	place other than your home within	l year before you filed for bankruptcy?	?			
	_	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	9: Identify Property You Hold or Control for	·					
23.	Do you hold or control any property that some for someone.	eone else owns? Include any prope	rty you borrowed from, are storing for	, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	10: Give Details About Environmental Inform	nation					
For	he purpose of Part 10, the following definitions	s apply:					
•	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun ubstances, wastes, or material.	dwater, or other medium, including sta	atutes or			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that y	you know about, regardless of whe	n they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	ironmental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Co	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	, did you own a business or have a	ny of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time				
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	nip (LLP)				
Offici	al Form 107 Statement	of Financial Affairs for Individuals Filin	g for Bankruptcy	page 6			

	btor 1 Christopher Holsapple btor 2 Mary Ann Holsapple		Case number (if known)
	_	ng or equity securities of a corporation	
	No. None of the above applies. Go to		
	☐ Yes. Check all that apply above and fil Business Name Address (Number, Street, City, State and ZIP Code)	Il in the details below for each business.  Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.  No Yes. Fill in the details below.	tcy, did you give a financial statement to	anyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
I ha are with		false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection tears, or both.
Ch	Christopher Holsapple nristopher Holsapple gnature of Debtor 1	/s/ Mary Ann Holsapple Mary Ann Holsapple Signature of Debtor 2	
Da	te April 18, 2019	Date April 18, 2019	
Did	Yes you pay or agree to pay someone who is no	ot an attorney to help you fill out bankrup	tcy forms?

Eill i	n this information to identify your consi									
	n this information to identify your case:				heck or 22A-1S		irected	in this form and	in Form	
Deb	tor 1 Christopher Holsapple					<b>д</b> рр.				
	tor 2 use, if filing)  Mary Ann Holsapple				<b>■</b> 1. 7	here is no pres	umption	n of abuse		
Unit	ed States Bankruptcy Court for the: District of New Mo	exico					nade ur	mine if a presun nder <i>Chapter 7 I</i> rm 1224-2)		
Case (if kno	e number					,		,	,	
(II KIIC	19911)							ot apply now be e but it could ap		
					☐ Cr	eck if this is a	n ame	nded filing		
Off	ficial Form 122A - 1									
Ch	apter 7 Statement of Your Cu	rrei	nt Moi	nthly Inc	com	6			12/15	
attacl case	s complete and accurate as possible. If two married people has separate sheet to this form. Include the line number to humber (if known). If you believe that you are exempted frof fying military service, complete and file Statement of Exempt 1: Calculate Your Current Monthly Income	which om a p	the addition	nal information of abuse becar	applies	On the top of a do not have prin	ny addit narily co	ional pages, write onsumer debts o	e your name and r because of	
1.	What is your marital and filing status? Check one o	nly.								
	☐ Not married. Fill out Column A, lines 2-11.									
	■ Married and your spouse is filing with you. Fill o	ut bot	th Columns	A and B, lines	s 2-11.					
	☐ Married and your spouse is NOT filing with you.	You	and your	spouse are:						
☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.										
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally	y separated	d under nonba	nkrupto	y law that appli	es or th			
10 th	ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-re 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that	month pal by 6.	period would Fill in the re	be March 1 thro sult. Do not inclu	ough Augude any	gust 31. If the amount m	ount of your	our monthly incom once. For examp	e varied during le, if both	
				Column A Column B Debtor 1 Debtor 2 non-filin						
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	, and $\epsilon$	commissio	ons (before all	\$	1,102.72	\$	3,410.92		
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payn	ments from	a spouse if	\$	0.00	\$	0.00		
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	<b>t.</b> Inclu ld, you	ude regulai ur depende	contributions nts, parents,	\$	0.00	\$	0.00		
5.	Net income from operating a business, profession,	, or fa	ırm							
			Deb	otor 1						
	Gross receipts (before all deductions)	\$	0.00							
	Ordinary and necessary operating expenses	-\$	0.00							
	Net monthly income from a business, profession, or far	rm \$	0.00	Copy here ->	> \$	0.00	\$	0.00		
6.	Net income from rental and other real property									
				otor 1						
	Gross receipts (before all deductions)	\$	0.00							
	Ordinary and necessary operating expenses	-\$	0.00							

0.00 Copy here -> \$

0.00

0.00

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

0.00

\$

\$

**Christopher Holsapple** Mary Ann Holsapple

Case number (if known)

						Column B		
		Debtor 1			Debtor 2 or non-filing spouse			
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a ber	nefit under					
	For you	-	0.00					
_	For your spouse		0.00					
	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paym Imanity, or internatior	ents nal or					
	·			\$ \$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		— .	\$	0.00	\$ \$	0.00	
			+	Ψ		Ψ	0.00	
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	1,102.72	+ 5 _	3,410.92	= \$	4,513.64
					J L		Total c	urrent monthly
Part	2: Determine Whether the Means Test Applies	to You						
12	Calculate your current monthly income for the yea	r Follow these stens	-					
12.	12a. Copy your total current monthly income from line	•		Con	y line 11	here->	¢	4 E42 C4
	12a. Copy your total current monthly income from line	11		Сор	y iiiie i i	11616->	φ	4,513.64
	Multiply by 12 (the number of months in a year)						<b>x</b> 1	2
	12b. The result is your annual income for this part of the	ne form				12b	. \$ 5	64,163.68
13.	Calculate the median family income that applies to	you. Follow these st	eps:					
	Fill in the state in which you live.	NM						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size						\$6	59,583.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban			in the separa	ate instrud	ctions		
14.	How do the lines compare?							
	<ul><li>Line 12b is less than or equal to line 13. 0</li><li>Go to Part 3.</li></ul>	On the top of page 1,	check box	1, There is I	no presun	nption of abus	e.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pre	esumption of	abuse is	determined by	y Form 12	2A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjur	y that the information	on this sta	atement and	in any att	achments is tr	ue and co	orrect.
	X /s/ Christopher Holsapple	X	/s/ Mary	/ Ann Hols	apple			
	Christopher Holsapple Signature of Debtor 1			<b>nn Holsap</b> e of Debtor 2				
	Date <b>April 18, 2019</b>	Date	April 18		•			
	MM / DD / YYYY	Zato	MM / DD					
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

Official Form 122A-1